

2/5/19

# **NEW BUSINESS**

~~AM~~ 1

## TAKEN FROM THE TABLE

Council Member Ayers moved to take from the table an Ordinance to amend Chapter 26 of the 1984 Detroit City Code, *Housing*, by adding Article V, *Fair Chance Access to Rental Housing*, consisting of Sections 26-5-1 through 26-5-20, and to provide for the maintenance and protection of the health, safety and general welfare of the public and to provide citizens with criminal records a fair opportunity to secure housing by regulating the use of criminal background checks as part of the tenant screening process, thereby facilitating reintegration into society and reducing the likelihood those citizens will reoffend; to establish that the City undertaking is limited to promotion of the general welfare; to set forth definitions and applicability of the article; to regulate the use and inquiry of criminal convictions by housing providers; to establish standards for adverse action; to set forth exceptions to this housing decisions; to require individualized assessments in certain circumstances; to set forth notice and posting requirements for housing providers; to establish guidelines for maintenance of records by housing providers; to protect the exercise of rights and protect the exercise of rights and prohibit retaliation; to require community outreach; to set forth confidentiality provisions; to establish implementation and enforcement provisions, including penalties for violations; and to establish administrative rules and annual reporting requirements, laid on the table January 15, 2019.

2/1/19 (Formal Session) - Postpone 1 week

The Ordinance was then placed on the order of third reading.

### THIRD READING OF ORDINANCE.

The title to the Ordinance was read a third time.

The ordinance was then read.

The question being “Shall this Ordinance Now Pass?”

The Ordinance was passed, a majority of the Council Members present voting therefore as follows:

# MAYOR'S OFFICE COORDINATORS REPORT

OVERALL STATUS (please circle): ☒ **APPROVED** ☐ **DENIED** ☐ **N/A** ☐ **CANCELED**

Petition #: 653 Event Name: Cupid's Undie Run - Detroit

Event Date: February 9, 2019

Street Closure: Various

Organization Name: Cupid's Charity

Street Address: 3457 Ringsby Ct. Suite 205 Denver, CO 80216

Receipt date of the <b>COMPLETED</b> Special Events Application:	
Date of City Clerk's Departmental Reference Communication:	
Due date for City Departments reports:	
Due date for the Coordinators Report to City Clerk:	

Event Elements (check all that apply):

- |  |  |  |  |
|--|--|--|--|
| <input type="checkbox"/> Walkathon                     | <input type="checkbox"/> Carnival/Circus       | <input type="checkbox"/> Concert/Performance | <input type="checkbox"/> Run/Marathon        |
| <input type="checkbox"/> Bike Race                     | <input type="checkbox"/> Religious Ceremony    | <input type="checkbox"/> Political Ceremony  | <input type="checkbox"/> Festival            |
| <input type="checkbox"/> Filming                       | <input type="checkbox"/> Parade                | <input type="checkbox"/> Sports/Recreation   | <input type="checkbox"/> Rally/Demonstration |
| <input type="checkbox"/> Fireworks                     | <input type="checkbox"/> Convention/Conference | <input type="checkbox"/> Other: _____        |  |
| <input type="checkbox"/> <b>24-Hour Liquor License</b> |  |  |  |

## Petition Communications (include date/time)

Cupid's Charity 7th Annual 1 Mile Fun Run to benefit Neurofibromatosis at the Filmore Detroit on Woodward Avenue (sidewalk only), Park Street and Clifford Avenue from 12:00pm - 4:00pm.

**\*\* ALL permits and license requirements must be fulfilled for an approval status \*\***

Date	Department	N/A	APPROVED	DENIED	Additional Comments
	DPD	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	DPD Assisted Event
	DFD/EMS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contracted with Hart EMS to Provide Private Medical Services
	DPW	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	DPD Assisted; No Permits Required
	Health Dept.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No Jurisdiction

Move To New Business - PM (30)  
ENTERED FEB 04 2019

Date	Department	N/A	APPROVED	DENIED	Additional Comments
	TED	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contracted with POCO to Provide Barricades & Signage for Street Closures
	Recreation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No Jurisdiction
	Bldg & Safety	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No Jurisdiction
	Bus. License	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No Jurisdiction
	Mayor's Office	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	All Necessary permits must be obtained prior to event. If permits are not obtained, departments can enforce closure of event.
	Municipal Parking	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Purchase of Parking Meters Required
	DDOT	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Impact on Buses

**MAYOR'S OFFICE**

Signature: **Bethanie Fisher**

Digitally signed by Bethanie Fisher  
DN: cn=Bethanie Fisher, o=City of Detroit, ou=Special Events, email=fisherb@detroitmi.gov, c=US  
Date: 2019.01.09 15:39:51 -05'00'

Date: **January 9, 2019**

## DEPARTMENTAL REFERENCE COMMUNICATION

*Tuesday, January 22, 2019*

*To: The Department or Commission Listed Below*

*From: Janice M. Winfrey, Detroit City Clerk*

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The following petition is herewith referred to you for report and recommendation to the City Council.

In accordance with that body's directive, kindly return the same with your report in duplicate within four (4) weeks.

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MAYOR'S OFFICE   DPW - CITY ENGINEERING DIVISION  
PLANNING AND DEVELOPMENT DEPARTMENT   POLICE DEPARTMENT  
FIRE DEPARTMENT   TRANSPORTATION DEPARTMENT  
MUNICIPAL PARKING DEPARTMENT   BUSINESS LICENSE CENTER

**653**   *Cupid's Charity, request to hold "Cupid's Undie Run - Detroit" on February 9, 2019 from 12:00 PM to 4:00 PM beginning at the Filmore with various temporary street closures.*

## City of Detroit Special Events Application

Successful events are the result of advance planning, effective communication and teamwork. The City of Detroit will be strictly adhering to the Special Events Guidelines; please print them out for reference. Petitioners are required to complete the information below so that the City of Detroit may gain a thorough understanding of the scope and needs of the event. This form must be completed and returned to the Special Events and Film Handling Office at least 60 days prior to the first date of the event. If submitted later than 60 days prior, application is subject to denial. Please type or print clearly and attach additional sheets and maps as needed.

### Section 1- GENERAL EVENT INFORMATION

Event Name: Cupid's Undie Run - Detroit

Event Location: The Fillmore

Is this going to be an annual event? ☒ Yes ☐ No

### Section 2- ORGANIZATION/APPLICANT INFORMATION

Organization Name: Cupid's Charity

Organization Mailing Address: 3457 Ringsby Ct Suite 205 Denver, CO 80216

Business Phone: 312-805-3515

Business Website: www.cupids.org

Applicant Name: Jamie Balhon

Business Phone: 312-805-3515 Cell Phone: 312-805-3515 Email: jamie@cupids.org

Event On-Site Contact Person:

Name: Amy Boulas

Business Phone: 303-507-7562

Cell Phone: 303-507-7562

Email: amv@cupids.org

Event Elements (check all that apply)

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Walkathon               | <input type="checkbox"/> Carnival/Circus   | <input type="checkbox"/> Concert/Performance         |
| <input checked="" type="checkbox"/> Run/Marathon | <input type="checkbox"/> Bike Race         | <input type="checkbox"/> Religious Ceremony          |
| <input type="checkbox"/> Political Event         | <input type="checkbox"/> Festival          | <input type="checkbox"/> Filming                     |
| <input type="checkbox"/> Parade                  | <input type="checkbox"/> Sports/Recreation | <input type="checkbox"/> Rally/Demonstration         |
| <input type="checkbox"/> Convention/Conference   | <input type="checkbox"/> Fireworks         | <input type="checkbox"/> Other: <u>Charity Event</u> |

Projected Number of Attendees: 1000

Please provide a brief description of your event:

Cupid's Charity requests to hold "Cupid's Undie Run - Detroit" starting at 2115 Woodward Ave and around the downtown area (1 mile brief "fun-run" on February 9<sup>th</sup> 2019 from 12-4pm with temporary street closures. The event has been in the Detroit area since 2013 and funds critical research dollars for the genetic disease Neurofibromatosis (NF).

What are the projected set-up, event and tear down dates and times (must be completed)?

Begin Set-up Date: 2/9 Time: 10am Complete Set-up Date: 2/9 Time: 12pm

Event Start Date: 2/9 Time: 12pm Event End Date: 2/9 Time: 4pm

Begin Tearing Down Date: 2/9 4pm Complete Tear Down Date: 2/9 5pm

Event Times (If more than one day, give times for each day):

Only 1 day – Saturday February 9<sup>th</sup> 2019

### Section 3- LOCATION/SITE INFORMATION

Location of Event: The Fillmore and surrounding streets for a brief period of time

Facilities to be used (circle):  
Facility



Park

City

Please attach a copy of Port-a-John, Sanitation, and Emergency Medical Agreements as well as a site plan which illustrates the anticipated layout of your event including the following: \* NOTE – ONLY ATTACHING ROUTE MAP AND ENTRANCES, AS OTHER THAN OUR 1 MILE RUN, OUR EVENT IS HELD INDOORS AT THE FILLMORE EVENT VENUE

- Public entrance and exit
- Location of merchandising booths
- Location of food booths
- Location of garbage receptacles
- Location of beverage booths
- Location of sound stages
- Location of hand washing sinks
- Location of portable restrooms

- Location of First Aid
- Location of fire lane
- Proposed route for walk/run
- Location of tents and canopies
- Sketch of street closure
- Location of bleachers
- Location of press area
- Sketch of proposed light pole banners

### Section 4- ENTERTAINMENT

Describe the entertainment for this year's event: We will have an on-site DJ or radio station emcee

that will be indoors

Will a sound system be used? ☒ Yes ☐ No

If yes, what type of sound system? Venues internal sound system and potentially a radio van out front to play music for 30 minutes during the event start

### Section 5- SALES INFORMATION

Will there be advanced ticket sales? ☒ Yes ☐ No

If yes, please describe: Ticket sales start at \$25 and increase in price through a price jump calendar. We offer individuals opportunities to utilize promotions and events for discounted admission as well.

Will there be on-site ticket sales? ☒ Yes ☐ No

If yes, list price(s): \$50 for a walk up ticket



Will there be vending or sales?

☐ Yes ☒ No

If yes, check all that apply:

☐ Food

☐ Merchandise

☐ Non-Alcoholic Beverages

☐ Alcoholic Beverages

Indicate type of items to be sold:

Will there be food trucks?

☐ Yes ☒ No

If yes, please list how many:

Will there be a charge for parking?

☐ Yes ☒ No

If yes, please describe the amount:

How will you advise attendees of parking options? We will share ride share options/promotional codes and parking information via email to our participants and via our FB Event Group

## Section 6- PUBLIC SAFETY & PARKING INFORMATION

Name of Private Security Company: Will be using police officers for the route and potentially security guards as suggested by The Fillmore

Contact Person:

Address: TBD

Phone:

City/State/Zip:

Number of Private Security Personnel Hired Per Shift:

Are the private security personnel (check all that apply):

☐ Licensed

☐ Armed

☐ Bonded

## Section 7- COMMUNICATION & COMMUNITY IMPACT INFORMATION

How will your event impact the surrounding community (i.e. pedestrian traffic, sound carryover, safety)?

Temporary street closures

Have local neighborhood groups/businesses approved your event?

☐ Yes

☒ No

Indicate what steps you have or will take to notify them of your event:

We will communicate our plan to those businesses and residents with the help of the Fillmore. We have not had issues with our event in the 6+ years past, which is a positive sign.

## Section 8- EVENT SET-UP

Complete the appropriate categories that apply to the event Structure

**Describe specific power needs for entertainment and/or music. If generators will be used, described how many and how they will be fueled:**

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Name of vendor providing generators: Contact Person:

Address:

Phone:

City/State/Zip

How Many?

Size/Height

Booth

Tents (enclosed on 3 sides)

Canopy (open on all sides)

Staging/Scaffolding

Bleachers

**Section 9- COMPLETE ALL THAT APPLY**

Emergency medical services?

Contact Person: Hart EMS Medical Services PLLC

Address: 12365 Shrewsbury

City/State/Zip: Farmington Hills, MI

Name of company providing port-a-johns.

Contact Person: N/A

Address:

Phone:

City/State/Zip:

Name of private catering company?

Contact Person: N/A

Address:

Phone:

City/State/Zip:

## SPECIAL USE REQUESTS

List any streets or possible streets you are requesting to be closed. Include the day, date, and time of requested closing and reopening. Neighborhood Signatures must be submitted with application for approval. Barricades are not available from the City of Detroit.

Will there be street closures? ☒ Yes ☐ No

If yes, please complete the street closure information below and attach a map or sketch of the proposed area for closure.

STREET NAME: See attached

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

CLOSURE DATES: \_\_\_\_\_ BEG TIME: \_\_\_\_\_ END TIME: \_\_\_\_\_

REOPEN DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

STREET NAME: See attached

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

CLOSURE DATES: \_\_\_\_\_ BEG TIME: \_\_\_\_\_ END TIME: \_\_\_\_\_

REOPEN DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

STREET NAME: See attached

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

CLOSURE DATES: \_\_\_\_\_ BEG TIME: \_\_\_\_\_ END TIME: \_\_\_\_\_

REOPEN DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

STREET NAME: See attached

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

CLOSURE DATES: \_\_\_\_\_ BEG TIME: \_\_\_\_\_ END TIME: \_\_\_\_\_

REOPEN DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

STREET NAME: See attached

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

CLOSURE DATES: \_\_\_\_\_ BEG TIME: \_\_\_\_\_ END TIME: \_\_\_\_\_

REOPEN DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

**PLEASE ADD IMPORTANT INFORMATION BELOW AND ATTACH A COPY OF THE FOLLOWING:**

- 1) CERTIFICATE OF INSURANCE**
  - 2) EMERGENCY MEDICAL AGREEMENT**
  - 3) SANITATION AGREEMENT**
  - 4) PORT-A-JOHN AGREEMENT**
  - 5) COMMUNITY COMMUNICATION**
- 

- 1.) COI has been requested and is in process – attached is the COI for 2017-2018 for reference
  - 2.) Sanitation agreement is N/A
  - 3.) Emergency medical agreement is N/A but we will work to have an EMS on site in case of minor injuries
  - 4.) Community Communication will be carried out at the following businesses via email on 1/7: Hot Taco, Town Pump Tavern, Centaur Cocktails and Small Plates, Cliff Bells, Colony Club, and Park Avenue Horse. All businesses agreed for the event in 2017/2018 (see attached).
  - 5.) Port-a-john agreement is N/A
- 
- 
-

## AUTHORIZATION & AFFADAVIT OF APPLICANT

I certify that the information contained in the foregoing application is true and correct to the best of my knowledge and belief that I have read, understood and agreed to abide by the rules and regulations governing the proposed Special Event, and I understand that this application is made subject to the rules and regulations established by the Mayor or the Mayor's designee. Applicant agrees to comply with all other requirements of the City, County, State, and Federal Government and any other applicable entity, which may pertain to Special Events. I further agree to abide by these rules, and further certify that I, on behalf of the Event agree to be financially responsible for any costs and fees that may be incurred by or on behalf of the Event, to the City of Detroit.

*Jamie Balhon*

1.3.2019

Signature of Applicant

Date

NOTE: Completion of this form does not constitute approval of your event. Pending review by the Special Events Management Team, you will be notified of any requirements, fees, and/or restrictions pertaining to your event.

## HOLD HARMLESS AND INDEMNIFICATION

The Applicant agrees to indemnify and hold the City of Detroit (which includes its agencies, officers, elected officials, appointed officials and employees) harmless from and against injury, loss, damage or liability (or any claims in respect of the foregoing including claims for personal injury and death, damage to property, and reasonable outside attorney's fees) arising from activities associated with this permit, except to the extent attributable to the gross negligence or intentional act or omission of the City.

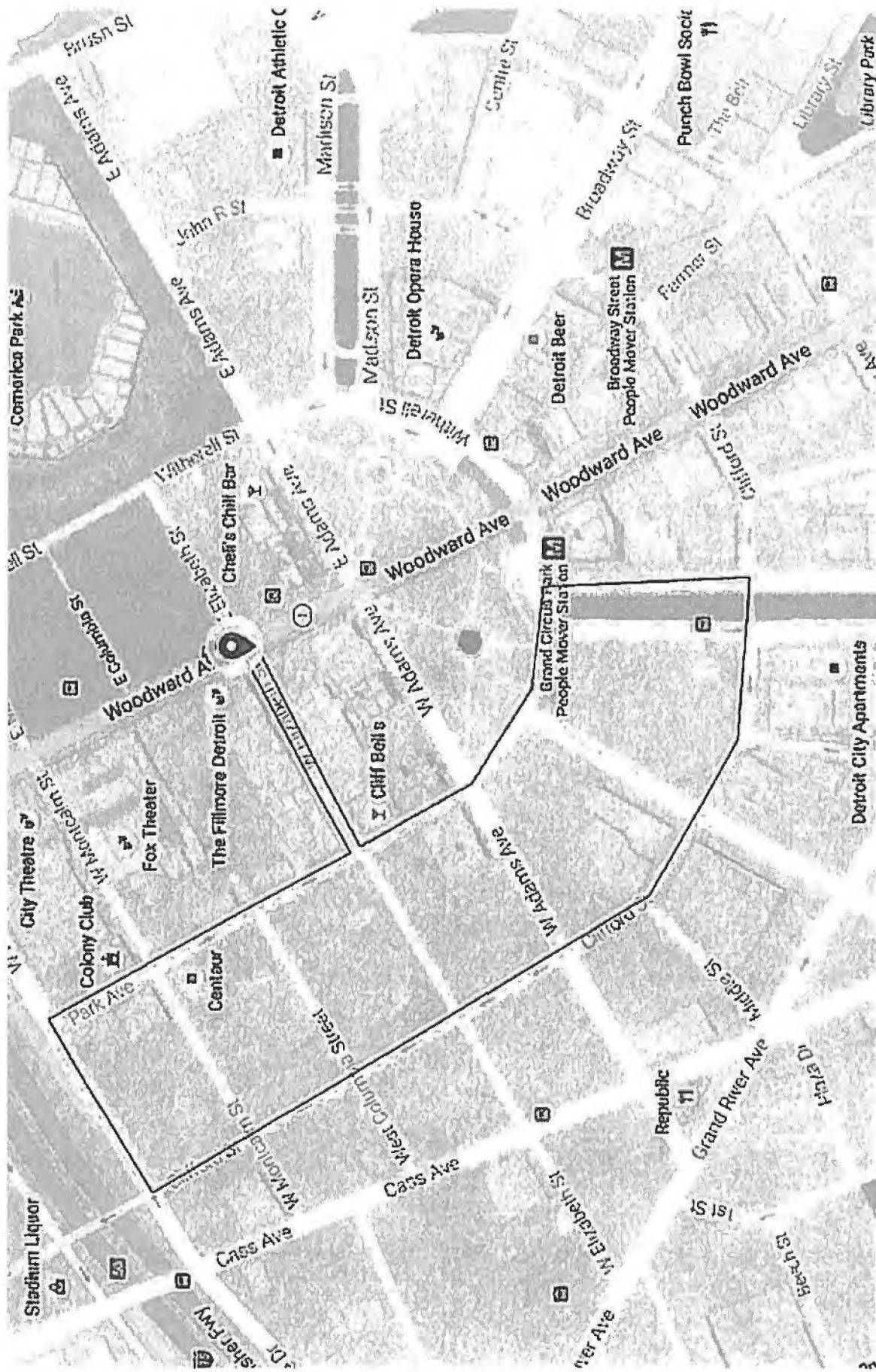
Applicant affirms that Applicant has read and understands the Hold Harmless and Indemnification provision and agrees to the terms expressed therein.

(Please Print)

Event Name: Cupid's Undie Run Event  
Date: 2.09.2019

Event Organizer:  
Cupid's Charity

Applicant Signature: *Jamie Balhon*  
Date: 1.3.2019



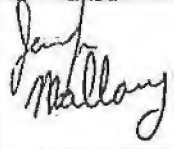
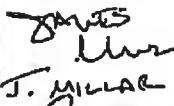
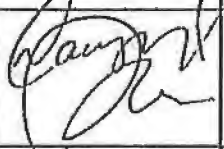



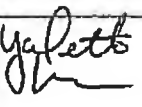
## Closures:

- West Elizabeth Street between Woodward Avenue and Park Avenue
- Park Avenue between West Fisher Service Drive and Washington Boulevard
- West Fisher Service Drive between Park Avenue and Clifford Street
- Clifford Street between West Fisher Service Drive and Washington Boulevard

# NEIGHBORHOOD NOTIFICATION FORM

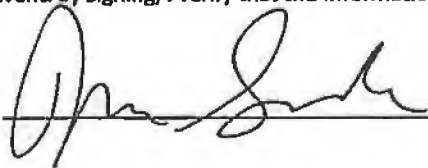
If your Special Event does not require street closures, parking located in front of a business or residential community, signatures are not required. The Special Events Office requires notification letters to be distributed in the event location. All information must be legible and the business and/or residents name must be included.

Complete the chart below with your letter distribution details.

Name	Address	Phone Number	Signature	Date
Hot Taco	2233 Park Ave. Detroit, MI 48201	313-963-4545		1-25-18
The Town Pump Tavern	100 W. Montcalm Detroit, MI 48201	313-961-1929		1/25/18
Centaur Cocktails & Small Plates	2233 Park Ave Detroit, MI 48201	313-963-4040		1-25-18
Cliff Bells	2030 Park Ave. Detroit, MI 48201	313-961-2543		1/25/18
Park Bar  kharris@gemtheatre.com	2040 Park Ave Detroit, MI 48226	313-926-2933		
Colony Club 	2310 Park Ave. Detroit, MI 48201	313-463-4215	Notified via e-mail 1/25/18	
Park Avenue House	2305 Park Ave Detroit, MI 48201	313-961-8310		01/25/18

The list above will be checked randomly for credibility. Any false information will be addressed and the Special Events permit may be revoked. The completed form must be returned to the Special Events Office 30 days before the Special Event. By signing, I verify that the information above is true and confirmed.

Authorized Signature:



Date:

1/31/18





## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
1/9/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Select Commercial Lines - (602) 666-4800 USI Insurance Services LLC 2421 West Peoria Ave, Suite 110 Phoenix, AZ 85029	<b>CONTACT NAME:</b> Kristin Humphreys
	<b>PHONE (A/C, No, Ext):</b> 602.666.4784 <b>FAX (A/C, No):</b> 866-359-4390
<b>INSURED</b> Cupid Charities 3457 Ringsby Ct Unit 205 Denver CO 80216	<b>E-MAIL ADDRESS:</b> kristin.humphreys@usi.com
	<b>INSURER(S) AFFORDING COVERAGE</b>
	<b>INSURER A:</b> United States Fire Insurance Company <b>NAIC #</b> 21113
	<b>INSURER B:</b> United States Liability Ins Co. <b>25895</b>
	<b>INSURER C:</b>
	<b>INSURER D:</b>
	<b>INSURER E:</b>
	<b>INSURER F:</b>

## COVERAGES

CERTIFICATE NUMBER: 13820416

REVISION NUMBER: See below

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC <input type="checkbox"/> OTHER:	X	USP284077	02/01/2019	03/01/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY		NBP1552839D	10/13/2018	10/13/2019	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/> N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Participant Accident		US1025022	02/01/2019	03/01/2019	\$10,000 maximum benefit

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

RE: Undie Run Event Being Held on February 9, 2019; Live Nation Entertainment, Inc; The City of Detroit; Quicken Loans-Main Office-Compuware; and the Filmore Detroit are additionally insured by endorsement as per written agreement as pertains to general liability

## CERTIFICATE HOLDER

## CANCELLATION

Live Nation Entertainment, Inc.  
9348 Civic Center Dr.  
Beverly Hills, CA 90210

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

The ACORD name and logo are registered marks of ACORD © 1988-2015 ACORD CORPORATION. All rights reserved.

ACORD 25 (2016/03)

(This certificate replaces certificate# 13820414 issued on 1/9/2019)

OFFICE OF CONTRACTING  
AND PROCUREMENT

January 29, 2019

37  
12  
3

HONORABLE CITY COUNCIL:

The Purchasing Division of the Finance Department recommends a Contract with the following firm(s) or person(s):

6000395      100% City Funding – AMEND 3 – To Provide Oils and Lubricants for DDOT. –  
Contractor: Wolverine Oil & Supply Co. Inc. – 10455 Ford Rd., Dearborn, MI  
481126 – Contract Period: Upon City Council Approval through June 30, 2019 –  
Contract Increase: \$0.00 – Total Contract Amount: \$330,000.00.

**DEPARTMENT OF TRANSPORTATION**

**This Amendment is For Time Extension Only. Original Contract Expires, January 31, 2019**

Respectfully submitted,

Boysie Jackson, Chief Procurement Officer  
Office of Contracting and Procurement

BY COUNCIL MEMBER BENSON

**RESOLVED**, that Contract No. 6000395 referred to in the foregoing communication dated January 29, 2019 be hereby and is approved.

ENTERED FEB 04 2019 Move To New Business RM (310)



CITY OF DETROIT  
OFFICE OF THE CHIEF FINANCIAL OFFICER  
OFFICE OF DEVELOPMENT AND GRANTS

~~A~~ 491

COLEMAN A. YOUNG MUNICIPAL CENTER  
2 WOODWARD AVENUE, SUITE 1026  
DETROIT, MICHIGAN 48226  
PHONE: 313 • 628-2158  
FAX: 313 • 224 • 0542  
WWW.DETROITMI.GOV

4

January 14, 2019

The Honorable Detroit City Council  
**ATTN: City Clerk Office**  
200 Coleman A. Young Municipal Center  
Detroit MI 48226

**RE: Request to Accept and Appropriate the FY 2019 Comprehensive Agreement,  
Opioid Academic Detailing Program**

The Michigan Department of Health and Human Services (MDHHS) has awarded the City of Detroit Health Department with a new project under the FY 2019 Comprehensive Agreement, Opioid Academic Detailing Program for a total of \$40,000.00. There is no match requirement. The total project cost is \$40,000.00. The grant period is October 1, 2018 through September 30, 2019.

The objective of the grant is to support the Health Department's Opioid Academic Detailing initiative. The funding allotted to the department will be utilized to provide academic detailing training for the responsible prescribing of opioids, to build knowledge around the needs of prescribers and providers, and to encourage effective communication regarding overall grant monitoring. This is a reimbursement grant.

If approval is granted to accept and appropriate this funding, the appropriation number is 20627.

I respectfully ask your approval to accept and appropriate funding in accordance with the attached resolution.

Sincerely,

Ryan Friedrichs  
Director, Office of Development and Grants

CC:  
Katerli Bounds, Deputy Director, Grants  
Sajjiah Parker, Assistant Director, Grants

This Request has been approved by the Office of the Budget.

ENTERED FEB 04 2019

Move To New Business - JA (Bio)

CITY CLERK 2019 JAN 22 PM 12:50



## Office of Development and Grants

---

### RESOLUTION

**Council Member** \_\_\_\_\_

**WHEREAS**, the Detroit Health Department is requesting authorization to accept a grant of reimbursement from the Michigan Department of Health and Human Services (MDHHS), in the amount of \$40,000.00, to support the Health Department's Opioid Academic Detailing initiative; and

**WHEREAS**, this request has been approved by the Office of the Budget; now

**THEREFORE, BE IT RESOLVED** that the Director or Head of the Department is authorized to execute the grant agreement on behalf of the City of Detroit, and

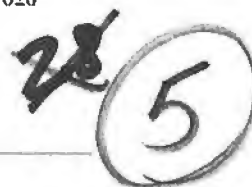
**BE IT FURTHER RESOLVED**, that the Budget Director is authorized to establish Appropriation number 20627 in the amount of \$40,000.00, for a new project under the FY 2019 Comprehensive Agreement, Opioid Academic Detailing Program.



CITY OF DETROIT  
OFFICE OF THE CHIEF FINANCIAL OFFICER  
OFFICE OF DEVELOPMENT AND GRANTS



COLEMAN A. YOUNG MUNICIPAL CENTER  
2 WOODWARD AVENUE, SUITE 1026  
DETROIT, MICHIGAN 48226  
PHONE: 313 • 628-2158  
FAX: 313 • 224 • 0542  
WWW.DETROITMI.GOV



December 14, 2018

The Honorable Detroit City Council  
**ATTN: City Clerk Office**  
200 Coleman A. Young Municipal Center  
Detroit MI 48226

**RE: Revision to the Request to Accept and Appropriate the FY 2018 Health Education and Community Benefit Grant**

The Detroit Medical Center (DMC) has awarded the City of Detroit Health Department with the FY 2018 Health Education and Community Benefit Grant for a total of \$55,450.00. Previously submitted to City Council and approved on November 11, 2018 with no match requirement. This cover letter and resolution serves as a revision and includes the required match in the amount of \$16,000.00: \$10,000.00 cash and an additional \$6,000.00 in-kind. The total project cost is \$101,450.00, with \$30,000.00 not coming directly to the City of Detroit. The grant period is August 22, 2018 through August 21, 2019.

The objective of the grant is to build a public health practice and professional development workshop for Health Department front-line staff and program managers. The funding allotted to the department will be utilized to pay for professional consulting, evaluation, travel, program related supplies, fees and costs.

If approval is granted to accept and appropriate this funding, the appropriation number is 20564, with a cash match of \$10,000.00 coming from appropriation number 00870 and an in-kind match of \$6,000.00 coming from appropriation number 00068.

I respectfully ask your approval to accept and appropriate funding in accordance with the attached resolution.

Sincerely,

Ryan Friedrichs  
Director, Office of Development and Grants

CC:  
Katerli Bounds, Deputy Director, Grants  
Sajjiah Parker, Assistant Director, Grants

This Request has been approved by the Office of the Budget.

ENTERED FEB 04 2019

Move To New Business - JA (B.O.)

CITY CLERK JAN 22 2019

**RESOLUTION**

**Council Member** \_\_\_\_\_

**WHEREAS**, the Health Department is requesting authorization to accept a grant of reimbursement from the Detroit Medical Center Foundation (DMC) in the amount of \$55,450.00 to build a public health practice and professional development workshop for the Health Department front-line staff and program managers; and

**WHEREAS**, this request has been approved by the Office of the Budget; now

**THEREFORE, BE IT RESOLVED** that the Director or Head of the Department is authorized to execute the grant agreement on behalf of the City of Detroit, and

**BE IT FURTHER RESOLVED**, that the Budget Director is authorized to establish Appropriation number 20564, in the amount of \$71,450.00, which includes a cash match of \$10,000 coming from appropriation 00870, and an additional in-kind match of \$6,000 coming from appropriation 00068 for the FY 2018 Health Education and Community Benefit Grant.



CITY OF DETROIT  
PLANNING AND DEVELOPMENT DEPARTMENT



COLEMAN A. YOUNG MUNICIPAL CENTER  
2 WOODWARD AVENUE SUITE 808  
DETROIT, MICHIGAN 48226  
(313) 224-1339 • TTY: 711  
(313) 224-1310  
WWW.DETROITMI.GOV

~~87~~  
35  
8

November 29, 2018

Detroit City Council  
1340 Coleman A. Young Municipal Center  
Detroit, MI 48226

**RE: Declaration of Surplus and Transfer of Jurisdiction  
Lodge Playfield (a/k/a 8901 Van Dyke)**

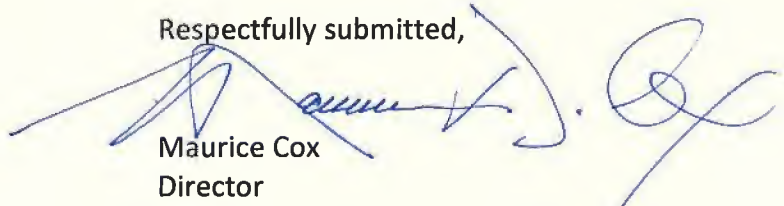
Honorable City Council:

The Detroit Parks and Recreation Department has indicated to the Planning and Development Department (P&DD) that the above captioned property, 8901 Van Dyke, is no longer appropriate to their needs. The Recreation Department has requested that P&DD assume jurisdictional control over the property, so that it may be marketed for sale and development.

The City desires to market the property for future commercial/industrial development, as part of the existing Economic Development Corporation (EDC) I-94 Industrial Park plan. In accordance with Sec. 14-8-3 of the Detroit City Code, the Finance Director has designated the Planning and Development Department responsible for the management and disposition of 8901 Van Dyke.

We, therefore, request that your Honorable Body approve the attached resolution, declaring 8901 Van Dyke to be surplus and authorizing the transfer of jurisdiction of 8901 Van Dyke from the Recreation Department to the Planning and Development Department for management and disposition.

Respectfully submitted,

  
Maurice Cox  
Director  
Planning and Development Department

MC/ajm

ENTERED JAN 10 2019

BB 2WKS SB B.O.

cc: Stephanie Washington, Mayor's Office

ENTERED JAN 24 2019

Move To Formal - SB (30)

2/1/19 (Formal) - Postpone 1 week

CITY CLERK 2018 DEC 9 PM 4:07



**BY COUNCIL MEMBER** \_\_\_\_\_

**WHEREAS**, the Detroit Parks and Recreation Department has jurisdiction over certain City of Detroit real property, 6901 Van Dyke ("Property"), as more particularly described in the attached Exhibit A; and

**WHEREAS**, the Detroit Parks and Recreation Department has requested that the Planning and Development Department assume jurisdictional control of the Property for management and disposition; and

**WHEREAS**, In accordance with Sec. 14-8-3 of the Detroit City Code, the Finance Director has designated the Planning and Development Department responsible for the management and disposition of 6901 Van Dyke; and

**WHEREAS**, the Planning and Development Department deems the Property not essential to the City and, therefore, requests that the Property be deemed surplus.

**NOW, THEREFORE, BE IT RESOLVED**, That in accordance with the foregoing communication, 6901 Van Dyke is declared surplus and the Detroit Parks and Recreation Department is authorized to transfer jurisdiction of the Property, more particularly described in the attached Exhibit A, to the Planning & Development Department.



## EXHIBIT A

Land in the City of Detroit, County of Wayne and State of Michigan being:

W VAN DYKE ALL THAT PART OF S E  $\frac{1}{4}$  OF SEC 21 T S R 12 E BG ALSO PARTS OF CASPAR HOFFMAN COS  
SUB GEO G EPSTEANS VAN DYKE PARK SUB NO 2 & CLARKS SUB DESC AS FOLS BEG AT A PTE IN W LINE  
VAN DYKE AVE & N LINE GEORGIA AVE TH N 88D 40M W 849.92 FT ALG SD N LINE TH N 1D 20M E 658.42  
FT TH S 88D 45M E 832.51 FT TH SLY ALG W LINE VAN DYKE AVE 658.18 FT TO P O B 15/--659.18 IRREG

A/K/A 8901 Van Dyke

Ward 15 Item 005613



CITY OF DETROIT  
PLANNING AND DEVELOPMENT DEPARTMENT

COLEMAN A. YOUNG MUNICIPAL CENTER  
2 WOODWARD AVENUE SUITE 808  
DETROIT, MICHIGAN 48226  
(313) 224-1339 • TTY:711  
(313) 224-1310  
WWW.DETROITMI.GOV

## **Interdepartmental Memorandum**

**To:** John Naglick, Director  
Finance Department

**From:** Maurice Cox, Director  
Planning and Development Department

**Date:** November 25, 2018

**Re:** Transfer of Jurisdiction  
Lodge Playfield (a/k/a 8901 Van Dyke)

---

The Detroit Building Authority ("DBA") requested the Detroit Parks and Recreation Department to declare surplus and transfer jurisdiction of Lodge Playfield (a/k/a 8901 Van Dyke) to the Planning and Development Department (P&DD). The property consists of approximately 12.72 acres of vacant land. The Recreation Department has acknowledged receipt of the request and indicated that the property is surplus to their needs.

The City desires to market the property for future commercial/industrial development, as part of the existing Economic Development Corporation ("EDC") I-94 Industrial Park plan.

Accordingly, pursuant to Section 14-8-3 of the Detroit City Code, it is hereby requested that the Finance Department approve the transfer of jurisdiction of the aforementioned property, 8901 Van Dyke, from the Detroit Parks and Recreation Department to the Planning and Development Department, subject to final review and approval by Detroit City Council.



In acknowledgement of this correspondence, please sign below as stipulated and return to:

**Maurice Cox, Director**  
**Planning and Development Department**  
**2 Woodward Ave., Suite 808**  
**Detroit, MI 48226**

Should you have any questions and/or concerns, please contact Mr. Alvin Mitchell at (313) 224 – 2375. Thank you for your attention to this matter.

MC: ajm

Attachment(s)

cc: D. Rencher

The Finance Department hereby acknowledges receipt of this correspondence and hereby authorizes the Detroit Parks and Recreation Department to proceed with the Transfer of Jurisdiction of 8901 Van Dyke to the Planning and Development Department, subject to review and approval by the Detroit City Council.

**FINANCE DEPARTMENT**

**BY:**

**Title:**

**Date:**

  
\_\_\_\_\_  
CFO/Finance Director  
11/28/18

## EXHIBIT A

Land in the City of Detroit, County of Wayne and State of Michigan being:

W VAN DYKE ALL THAT PART OF S E ¼ OF SEC 21 T S R 12 E BG ALSO PARTS OF CASPAR HOFFMAN COS  
SUB GEO G EPSTEANS VAN DYKE PARK SUB NO 2 & CLARKS SUB DESC AS FOLS BEG AT A PTE IN W LINE  
VAN DYKE AVE & N LINE GEORGIA AVE TH N 88D 40M W 849.92 FT ALG SD N LINE TH N 1D 20M E 658.42  
FT TH S 88D 45M E 832.51 FT TH SLY ALG W LINE VAN DYKE AVE 658.18 FT TO P O B 15/--659.18 IRREG

A/K/A 8901 Van Dyke

Ward 15 Item 005613



1301 Third Street • Suite 328 • Detroit, MI 48226 • 313-224-7238 phone • 313-224-4998 fax

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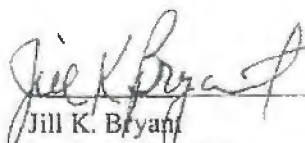
TO: JAN ANDERSON  
DIRECTOR  
DETROIT PARKS AND RECREATION DEPARTMENT

FROM: JILL K. BRYANT  
PROPERTY MANAGER  
DETROIT BUILDING AUTHORITY

DATE: NOVEMBER 7, 2018

**RE: DECLARATION OF SURPLUS – 8901 VAN DYKE**

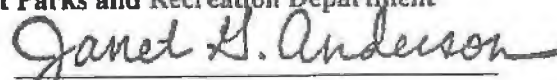
The Detroit Building Authority (DBA) requests the Detroit Parks and Recreation Department to declare surplus & transfer jurisdiction of the above mentioned property to the Planning & Development Department. The Planning & Development Department desires to facilitate development on the site.

  
Jill K. Bryant  
Property Manager  
Detroit Building Authority

The Detroit Parks and Recreation Department acknowledges receipt of this request of the above-captioned property and hereby declares the above-captioned property **Surplus** to their needs.

Detroit Parks and Recreation Department

BY:

  
Janet H. Anderson, Director

DATE:

11/30/18

MICHAEL E. DUGGAN, MAYOR



CITY OF DETROIT  
PUBLIC LIGHTING DEPARTMENT

1

51

1340 THIRD STREET  
DETROIT, MICHIGAN 48226  
PHONE 313•267•5130  
FAX 313•267•8152  
WWW.DETROITMI.GOV

27

January 17, 2019

The Honorable City Council  
1340 Coleman A. Young Municipal Center  
Detroit, MI 48226

RE: Grand Valley State University  
Petition #579

Dear Council Members,

It has come to our attention Petition #579 from Grand Valley State University received November 8, 2018 was omitted by the Public Lighting Department (PLD). Grand Valley State University has requested permission to hang approximately six banners along Madison and John R streets.

The Public Lighting Department has inspected requested poles and find them to be structurally sound, and is recommending approval for Grand Valley Status University to hang their banners on approved pole locations from January 8, 2019 to July 8, 2019.

**Note: There are no brackets on several poles.** The Public Lighting Authority (PLA) is working with its vendor to facilitate reattachment of banner brackets where needed.

Respectfully Submitted,

John Prymack, Director  
Public Lighting Department

Enclosure: Petition

Cc: Council Members  
File  
PLA

ENTERED FEB 04 2019

Move To New Business - JA (30)

Janice M. Winfrey  
City Clerk

**City of Detroit**  
**OFFICE OF THE CITY CLERK**

Caven West  
Deputy City Clerk/Chief of Staff

**DEPARTMENTAL REFERENCE COMMUNICATION**

*Thursday, November 08, 2018*

*To: The Department or Commission Listed Below*

*From: Janice M. Winfrey, Detroit City Clerk*

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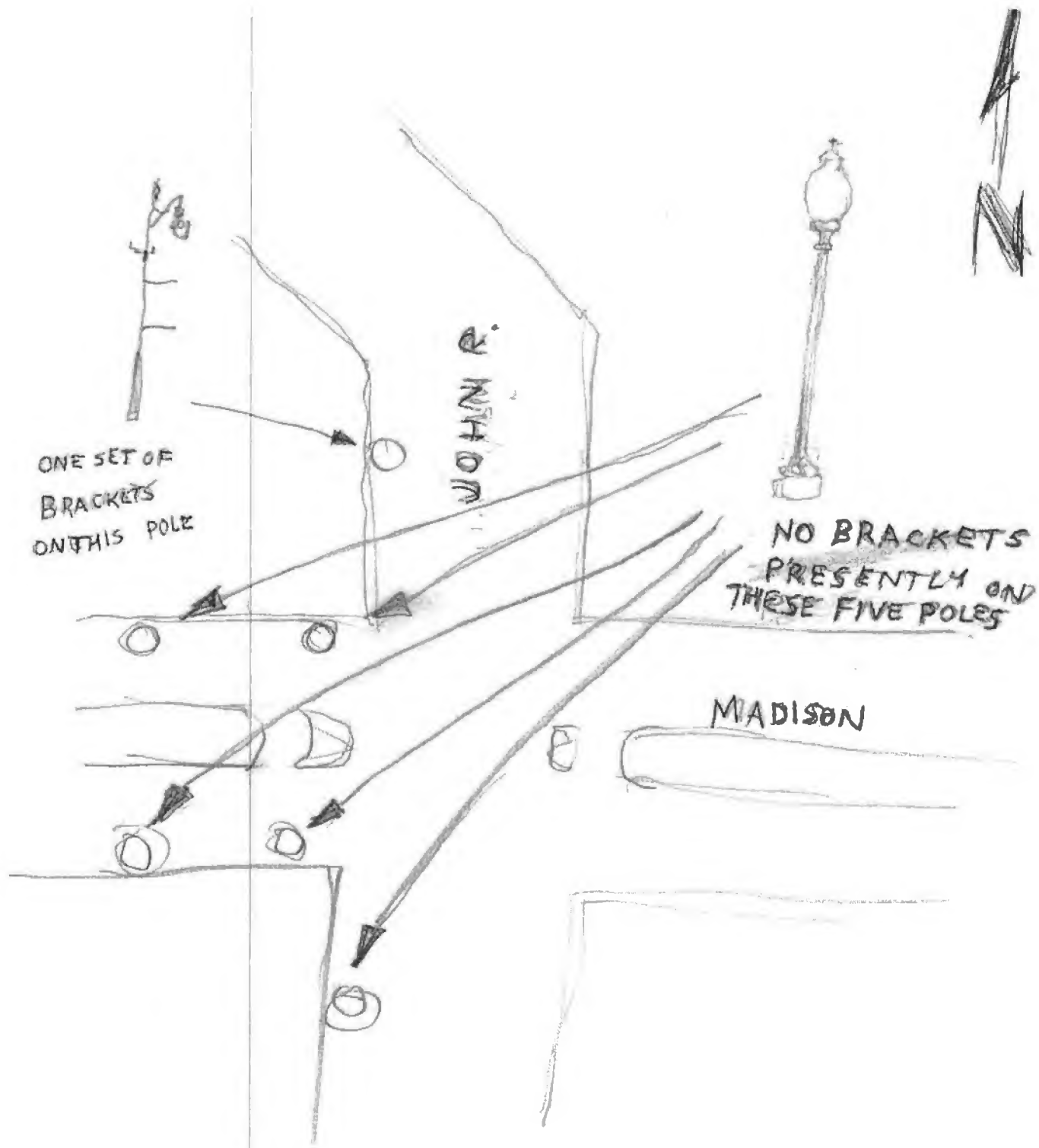
The following petition is herewith referred to you for report and recommendation to the City Council.

In accordance with that body's directive, kindly return the same with your report in duplicate within four (4) weeks.

---

PLANNING AND DEVELOPMENT DEPARTMENT   DPW - CITY ENGINEERING DIVISION  
LEGISLATIVE POLICY DIVISION   PUBLIC LIGHTING DEPARTMENT

**579**     *Grand Valley State University, request to hang approximately six banners along Madison and John R.*



579

*Andrew C. C.*  
1-17-19



# City Of Detroit Banner Permit Application

## For Banners In the Public Right-Of-Way

This application is for the proposed banner(s) for a specified period of time only. The City of Detroit will be strictly adhering to the Banner Permit Guidelines; please print them out for reference. This form must be completed and returned at least 60 days prior to the date of installation. If submitted later than 60 days prior, application is subject to denial. If the requested Banner location is on a Michigan State Truck Line or Wayne County Road the application must be submitted at least 180 days prior to the date of installation. After expiration of the permit (if granted), or should the banner change in any way, another application will be required.

### SECTION 1 - APPLICANT INFORMATION

Contact Name:

Bryan Bickford

Name of Organization:

Grand Valley State University

Mailing Address:

1 Campus Drive, JH 2090; Allendale, MI 49401

Phone Number:

(616) 331-8629

E-Mail Address:

bickforb@gvsu.edu

Type of Banner(s) check all that apply:

☐ City of Detroit

☒ Non-Profit

☐ Other

☐ Community

☐ Business District

☐ Special Event

☐ Holiday

If registered as a non-profit, please indicate your non-profit status identification number and attach a copy of the certificate.

Non-profit identification number: 381 684 280

If applying for a business district banner(s) please identify the business district.

Business District: \_\_\_\_\_

Type of Request:

☒ Initial Permit

☐ Permit Renewal

If this request is for permit renewal, please provide the following:

Permit Identification Number: \_\_\_\_\_

Permit Expiration Date: \_\_\_\_\_

SECTION 2 - COMMERCIAL BANNER COMPANY

Contact Name: Michael Gilpin  
Name of Organization: Fast Signs  
Mailing Address: 3582 29th St. SE, Ste. 101, Grand Rapids, MI 49512  
Phone Number: (616) 949-7446 E-Mail Address: ~~mike~~ michael.gilpin@fastsigns.com

SECTION 3 - BANNER INFORMATION

Purpose of Banner(s):

Marketing of Grand Valley State University

Time Period to display Banner(s): Install Date: 1/8/19 Removal Date: 7/8/19  
Number of Banner(s) to display: 6

Streets on which Banner(s) are to be displayed:

- ① Madison
- ② John R

Are any of the poles located on a Michigan State Trunk Line or Wayne County Road?  
Refer to listing of Trunk Lines and Wayne County Roads. ☐ YES ☒ NO

Describe wording on the Banner(s) and any graphics:

Two-banner display: LAKER EFFECT across the top. Picture of student or alumnus on one banner, with name, majors/degree, current job (alumnus) or hometown (student). On other banner: Grand Valley logo and URL for gvsu-edu/detroit

MARSH USA INC.		EVIDENCE OF COVERAGE CONTRACTS				EVIDENCE NUMBER															
<small>THIS EVIDENCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE HOLDER. THIS DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE CONTRACTS BELOW. THIS DOES NOT CONSTITUTE A CONTRACT BETWEEN THE FACILITY, AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE HOLDER. IMPORTANT: IF THE HOLDER IS AN ADDITIONAL INSURED, THE CONTRACT MUST BE ENDORSED. IF SUBROGATION IS WAIVED, SUBJECT TO THE TERMS AND CONDITIONS OF THE CONTRACT, CERTAIN CONTRACTS MAY REQUIRE AN ENDORSEMENT. A STATEMENT ON THIS EVIDENCE DOES NOT CONFER RIGHTS TO THE BELOW HOLDER IN LIEU OF SUCH ENDORSEMENT(S).</small>																					
<b>PRODUCER</b> <b>MARSH USA INC.</b> <b>ONE TOWNE SQUARE</b> <b>SUITE 1100</b> <b>SOUTHFIELD, MI 48076</b>		<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center;">FACILITY AFFORDING COVERAGE</th> </tr> </thead> <tbody> <tr> <td style="width: 30%;">COMPANY</td> <td>MI HIGHER EDUCATION GROUP SELF-INS &amp; RISK MGT FACILITY</td> </tr> <tr> <td>A</td> <td></td> </tr> <tr> <td>COMPANY</td> <td></td> </tr> <tr> <td>COMPANY</td> <td></td> </tr> <tr> <td>COMPANY</td> <td></td> </tr> <tr> <td>COMPANY</td> <td></td> </tr> </tbody> </table>						FACILITY AFFORDING COVERAGE		COMPANY	MI HIGHER EDUCATION GROUP SELF-INS & RISK MGT FACILITY	A		COMPANY		COMPANY		COMPANY		COMPANY	
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<b>INSURED</b> <b>GRAND VALLEY STATE UNIVERSITY</b> <b>ATTN: HEATHER TAYLOR</b> <b>4077 JAMES H. ZUMBERGE HALL</b> <b>ALLENDALE, MI 49401</b>																					
<b>COVERAGES</b> <small>THIS IS TO CERTIFY THAT THE CONTRACTS LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE CONTRACT PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS MAY BE ISSUED OR MAY PERTAIN, THE COVERAGE AFFORDED BY THE CONTRACTS DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH CONTRACTS. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.</small>																					
CO LTR	TYPE OF COVERAGE	CONTRACT NUMBER	EFFECTIVE DATE	EXPIRATION DATE	LIMITS																
A	GENERAL LIABILITY * OCCUR	GL712018	7/1/2018	7/1/2019	GENERAL AGGREGATE PRODUCTS COMP/OP AGG PERSONAL & ADV INJURY EACH OCCURRENCE	\$	1,000,000														
A	AUTO LIABILITY * ANY AUTO	AL712018	7/1/2018	7/1/2019	COMBINED SINGLE LIMIT																
A	OTHER AUTO PHYSICAL DAMAGE OWNED, RENTED & LEASED VEHICLES	MPD712018	7/1/2018	7/1/2019	EACH OCCURRENCE DEDUCTIBLE																
A	OTHER ERRORS & OMISSIONS (INCLUDING PROFESSIONAL LIABILITY (CLAIMS MADE))	EQ712018	7/1/2018	7/1/2019	EACH CLAIM AGGREGATE																
<small>DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS (LIMITS MAY BE SUBJECT TO DEDUCTIBLES OR RETENTIONS):</small>																					
Evidence of coverage only for a permit to hang GVSU banners on street poles outside of Grand Valley's Detroit Center building  The City of Detroit is Additional Insured for Commercial General Liability only per written contractual obligation terms and conditions																					
<b>EVIDENCE HOLDER</b>  City of Detroit 2 Woodward Avenue, Suite 333 Detroit, MI 48228  <u>banners@detroitmi.gov</u>			<b>CANCELLATION</b> NONE OF THE ABOVE DESCRIBED COVERAGE CONTRACTS CAN BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF    <div style="text-align: right;">   MARSH USA INC  BY: JERRY J. MCKAY </div>																		
<small>VALID AS OF: 7/1/2019</small>																					

This endorsement modifies coverage provided under the following:

**M.U.S.I.C. GENERAL LIABILITY COVERAGE CONTRACT**

**COVERAGE FOR PERSON, ENTITY OR ORGANIZATION (COVERED PARTY)  
UNDER A COVERED CONTRACT**

**A. Coverage**

SECTION II - WHO IS COVERED is amended to include any person, entity or organization (hereinafter referred to as a **Covered party**) for **Bodily Injury, Personal injury, Advertising injury or Property damage** covered under this General Liability Coverage Contract that occurs during the Coverage Period but only with respect to a **Covered contract** and only where you have agreed in writing to include the **Covered contract** and **Covered party** for such coverage. Coverage by this endorsement to the **Covered party** is limited to:

1. Liability arising out of a covered **Occurrence** that is caused, in whole or in part by you or on your behalf by your agents or subcontractors; and
2. The extent of coverage and Limits of Liability as stipulated in the **Covered contract**. However, such coverage and limits shall not increase our Limits of Liability as stated in Section III – LIMITS OF LIABILITY or alter any of the terms of coverage stated in this General Liability Coverage Contract. Further, our payment obligation shall not exceed the lesser of:
  - a. The Limits of Liability stated in SECTION III – LIMITS OF LIABILITY and as shown in the Declarations; or
  - b. The limits(s) of coverage stipulated in the **Covered contract** applicable to general liability coverage.

The **Covered contract** must be effective and executed prior to a covered **Occurrence**.

**B. Exclusions**

The following exclusions apply to this endorsement and are in addition to those exclusions stated in the General Liability Coverage Contract or as amended by endorsement:

1. This insurance does not apply to **Bodily Injury, Personal injury, Advertising injury or Property damage** arising out of, resulting from, caused by or contributed to by:
  - a. Sole negligence by the **Covered party** or anyone else acting on the **Covered party's** behalf.
  - b. An **Occurrence** which takes place after the cancellation date of the General Liability Coverage Contract or cancellation date of this endorsement, or by termination or ending by either party of the **Covered contract**, whichever occurs first.

**C. Limits of Liability Application**

Any payment obligation by us under this endorsement involving a **Covered contract** that is a result of a covered **Occurrence** taking place during the coverage period will be subject initially to the **Annual Aggregate Loss Retentions** shown in the Declarations and also subject to the applicable limits of liability set forth in paragraph **A.2 (Coverage)** of this endorsement. Nothing in this endorsement creates any additional, supplemental or separate limits of liability under this General Liability Coverage Contract.

**D. Conditions**

The following conditions apply to this endorsement and are in addition to those conditions stated in the General Liability Coverage Contract or as amended by endorsement.

1. If we cancel the General Liability Coverage Contract (including this endorsement) or only cancel this endorsement prior to the General Liability Coverage Contract's expiration date and where specifically stipulated in the approved **Covered contract**, we agree to provide the **Covered party** to the **Covered contract** advance written notice of such cancellation based on the number of days specified therein.
2. The coverage provided by this endorsement is primary to, and on a non-contributory basis with, any other available coverage to the **Covered party**.
3. The **Covered party** must give us prompt written notice of an **Occurrence** involving the **Covered contract** that may result in a claim or **Suit**. Any ensuing claim or **Suit** must include and be brought against both the **Covered party** and us. We will have the right and duty to conduct and control the legal defense for the **Covered party** named in the claim or **Suit**. Our defense of and any payment obligations for a claim or **Suit** will be subject to the terms and conditions set forth in General Liability Coverage Contract or as amended by endorsement.
4. The **Covered party** must cooperate with us during the handling of the potential claim, claim or **Suit** involving a **Covered contract**.
5. You must retain a written copy of the **Covered contract**.

## MAINTENANCE & REMOVAL AGREEMENT

It is understood and agreed that during the initial display, and subsequent renewal periods if applicable, the permittee shall be responsible for inspecting banners and poles; replacing and/or removing banners that are torn, defaced or in general disrepair, including rigging. Where any street banner is found to present an immediate threat of harm to the public health, welfare or safety, the City shall summarily cause its removal.

It is also understood and agreed that banners are to be removed within seventy-two (72) hours of the revocation date of the permit. Any street banner not removed within that time period shall be removed by the City without notice to the permittee.

If the City removes banners because they are in disrepair, present a threat of harm, or because the permit has expired, it is understood and agreed that a portion or all of the refundable deposit will be forfeited by the permittee in order to cover the City's expense. If the expense of removal exceeds the amount of deposit, it is understood and agreed that the excess amount shall be collected from the person/entity to which the permit was issued.

It is also understood and agreed that in such cases when the City removes banners there is no guarantee that the banners can be reclaimed by the permittee.

BRYAN BICKFORD

Applicant: Print Name

[Signature]

Applicant: Signature

11/5/18

Date

MICHAEL GULPIN

Commercial Banner Representative: Print Name  
i.e., installer/remover

[Signature]

Commercial Banner Representative: Signature

11-2-2018

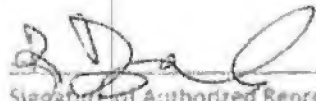
Date

AGREEMENT - COMMUNITY

CITY OF DETROIT:

To the extent permitted by law,  
For and in consideration of the granting of a permit by the City of Detroit to suspend a Banner  
or Banners, the undersigned does agree to indemnify and hold harmless the City of Detroit, its  
officers, agents and employees from any and all claims arising out of the placement of,  
maintenance of, use of, or removal of banners, including claims involving Banners (or the  
structure upon which they are hung) falling on people or property.

INDEMNITOR (S):



Signature of Authorized Representative (Organization)

BRYAN BICKFORD

Name

1 CAMPUS DRIVE, 2090 JHZ, Allen Dale, MI 49401

Address, City, State, Zip Code

616-331-8629

Phone Number

11/5/18

Date

FASTSIGNS OF GRAND RAPIDS

Signature of Authorized Representative (Banner Company)

MICHAEL GILPIN

Name

3582 29th ST, GRAND RAPIDS, MI 49512

Address, City, State, Zip Code

(616) 949-7446

Phone Number

11-2-2018

Date

The following items **MUST BE** included in the permit application package in order for it to be considered:

- Completed banner permit application form
- Signed and dated indemnity agreement
- Signed and dated maintenance and removal agreement
- Copy of certificate of insurance
- Sketch, drawing, or actual sample of the banner to be displayed
- Listing and/or map of the specific locations for the Banner(s)
- \$100 non-refundable permit fee
- A refundable deposit to be held in escrow presented to Business License Department prior to the issuance of the Banner Permit

The undersigned applicant(s) agrees to abide by the provisions set by the City of Detroit to suspend a Banner or Banner(s) during the time period requested for this permit.

BRYAN BICKFORD

Applicant: Print Name

[Signature]

Applicant: Signature

11/5/18

Date

MICHAEL GILPIN

Commercial Banner Representative: Print Name

i.e., installer/remover

[Signature]

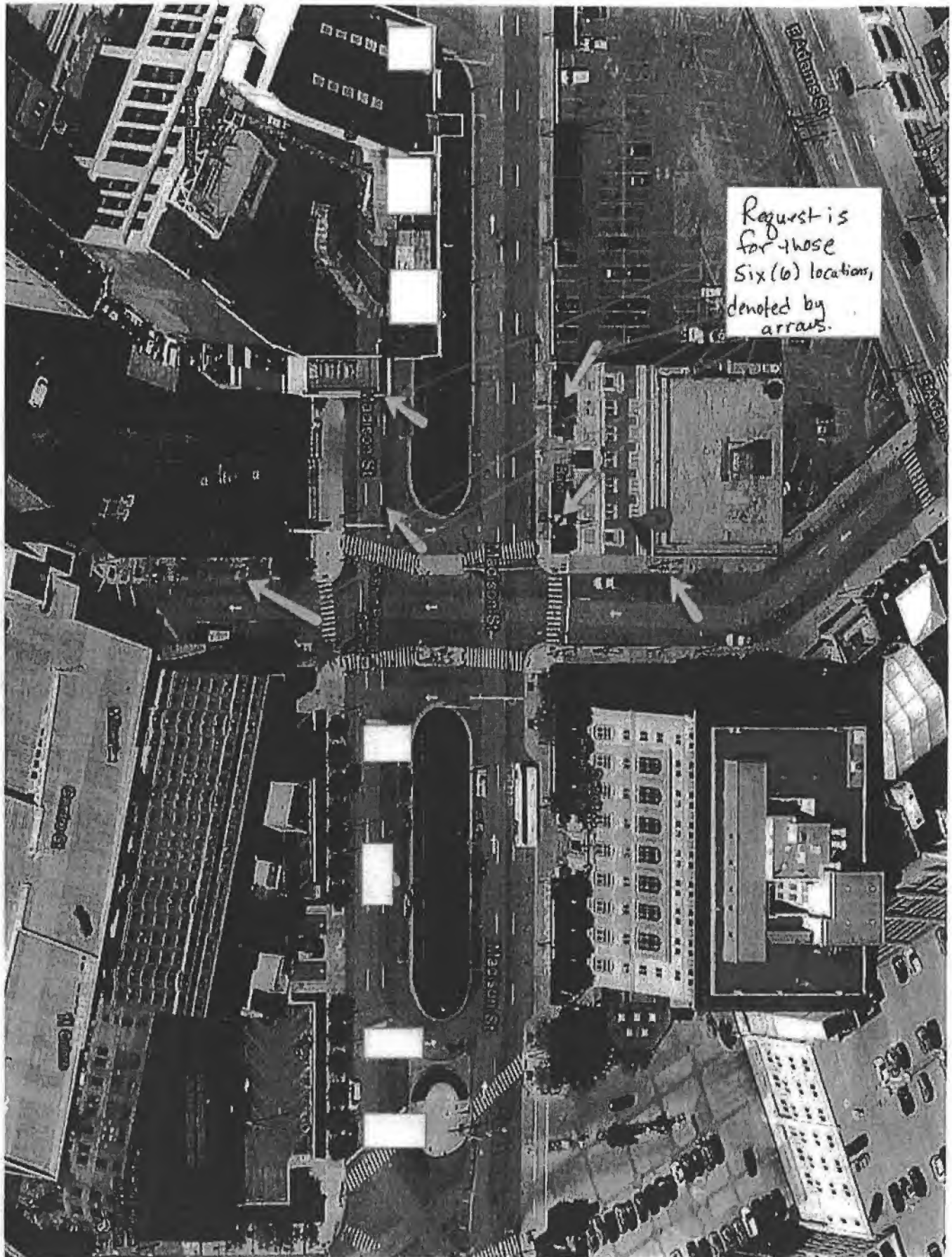
Commercial Banner Representative: Signature

11-2-2018

Date



Request is  
for those  
Six (6) locations,  
denoted by  
arrows.



LAKER



BRIAN PARKS  
FINANCE, ECONOMICS  
MAJORS '08, MBA '14  
COST MANAGEMENT  
ANALYST  
GENERAL MOTORS

EFFECT



GRAND VALLEY  
STATE UNIVERSITY

*gvsu.edu/Detroit*

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BRITTANY SUGG  
EXERCISE SCIENCE  
MAJOR  
PLYMOUTH

EFFECT



GRAND VALLEY  
STATE UNIVERSITY

*gvsu.edu/Detroit*

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DOMINIQUE STEVENS  
SOCIAL WORK  
MAJOR  
CHESTERFIELD

EFFECT



GRAND VALLEY  
STATE UNIVERSITY

*gvsu.edu/Detroit*

LAKER



DOUGLAS CHAMBERS  
NURSING AND  
SPANISH MAJORS  
CLINTON TOWNSHIP

EFFECT



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STATE UNIVERSITY

*gvsu.edu/Detroit*

LAKER



JOSHUA BRYANT  
INFORMATION  
SYSTEMS MAJOR  
DETROIT

EFFECT



GRAND VALLEY  
STATE UNIVERSITY

*gvsu.edu/Detroit*

LAKER



GRANT BORREGARD  
MECHANICAL  
ENGINEERING MAJOR  
FARMINGTON HILLS

EFFECT



GRAND VALLEY  
STATE UNIVERSITY

*gvsu.edu/Detroit*

## Request for Taxpayer Identification Number and Certification

► Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Give Form to the  
requestor. Do not  
send to the IRS.

Print or type.  
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <b>Grand Valley State University</b>	
2 Business name/disregarded entity name, if different from above <b>d/b/a: WGVSU, VAGTC, The Meadows, MIHAWRI, GVSU Lakeshore, GVSU Family Health Center, MI-SBDC</b>	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C-C corporation, S-S corporation, P-Partnership) ► Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input checked="" type="checkbox"/> Other (see instructions) ►	
4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3). Example: none (if any) <b>5</b> Example: from FATCA reporting code (if any) <b>E</b>	
5 Address (number, street, and apt. or suite no.) (see instructions) <b>2015 James H. Zumberge Hall, 1 Campus Drive</b>	
6 City, state, and ZIP code <b>Allendale, MI 49401-9403</b>	
7 (Set account number(s) here (optional))	

### Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requestor* for guidelines on whose number to enter.

Social security number								
				-				
or								
Employer identification number								
3	8	-	1	0	0	4	2	0

### Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ► <i>Brian J. McDevitt</i>	Date ► <i>1-15-18</i>
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### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What Is Backup Withholding*, later.



OFFICE OF THE  
DETROIT CITY CLERK

2018 NOV -1 A 10: 37

Nov. 5, 2018

Dear Andre,

Contained in this package is the application for installing six street banners along the street near the Grand Valley State University building in the City of Detroit.

Also included in this package are two checks to cover the permit fee and the refundable deposit. Check # A0381917 for \$100 is for the permit fee and check #A0381918 for \$1,000 is for the refundable deposit.

I would be most appreciative if you could confirm receipt of the application.

Please let me know if there is anything else that I need to provide.

Sincerely,

Peg West  
Institutional Marketing  
Grand Valley State University  
(616) 331-7037  
ensingm1@gvsu.edu

8

**RESOLUTION BY COUNCIL MEMBER GABE LELAND**

**RESOLUTION SUPPORTING THE CITY OF DETROIT GRANTING UNPAID FEDERAL EMPLOYEES AN EXTENSION ON THEIR CITY PAYMENTS**

**WHEREAS,** The mission of the Detroit City Council is to promote the economic, cultural and physical welfare of Detroit's citizens and residents through Charter-mandated legislative functions; and

**WHEREAS,** The debate between the two parties to fund President Trump's proposed border wall, has led to a disastrous time of historic proportions, in the lives of thousands of American families; **THEREFORE BE IT**

**RESOLVED,** That the Detroit City Council strongly urges the Mayor of Detroit to submit an authorization to the Detroit City Council **to grant to unpaid federal employees, an extension on their City payments, including water bills, permits, parking fines and taxes, while the negotiations are ongoing; NOW THEREFORE BE IT FINALLY**

**RESOLVED,** That this resolution be forwarded to President Trump, the Detroit Delegation in Washington D.C., and Mayor Michael Duggan



David Whitaker, Esq.  
*Director*  
Irvin Corley, Jr.  
*Executive Policy Manager*  
Marcell R. Todd, Jr.  
*Senior City Planner*  
Janese Chapman  
*Deputy Director*

LaKisha Barclift, Esq.  
M. Rory Bolger, Ph.D., AICP  
Elizabeth Cabot, Esq.  
Tasha Cowen  
Richard Drumb  
George Etheridge  
Deborah Goldstein

**City of Detroit**  
**CITY COUNCIL**  
**LEGISLATIVE POLICY DIVISION**  
208 Coleman A. Young Municipal Center  
Detroit, Michigan 48226  
Phone: (313) 224-4946 Fax: (313) 224-4336

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Kimani Jeffrey  
Anne Marie Langan  
Jamie Murphy  
Kim Newby  
Analine Powers, Ph.D.  
Jennifer Reinhardt  
Sabrina Shockley  
Thomas Stephens, Esq.  
David Teeter  
Theresa Thomas  
Kathryn Lynch Underwood

TO: COUNCIL MEMBERS

FROM: David Whitaker, Director   
Legislative Policy Division Staff

DATE: January 28, 2019

RE: **RESOLUTION SUPPORTING THE CITY OF DETROIT GRANTING UNPAID  
FEDERAL EMPLOYEES AN EXTENSION ON THEIR CITY PAYMENTS**

Council member Gabe Leland requested that the Legislative Policy Division (LPD) draft a **RESOLUTION SUPPORTING THE CITY OF DETROIT GRANTING UNPAID FEDERAL EMPLOYEES AN EXTENSION ON THEIR CITY PAYMENTS.**

Attached, please find our draft of the aforementioned resolution.

Please contact us if we can be of any further assistance.

Attachment



**BY COUNCIL PRESIDENT PRO TEMPORE MARY SHEFFIELD AND COUNCIL MEMBER RAQUEL CASTAÑEDA-LÓPEZ:**

**RESOLUTION ENCOURAGING AN ONGOING COOPERATIVE RELATIONSHIP  
BETWEEN THE UNITED STATES AND CUBA**

**WHEREAS,** In 1960, the United States government imposed an economic, commercial, and financial embargo against Caribbean island nation of Cuba; and

**WHEREAS,** On December 17, 2014, U.S. President Barack Obama and Cuban President Raul Castro agreed to reestablish diplomatic relations between the two nations; and

**WHEREAS,** Despite executive actions by President Obama easing certain regulations, the U.S. embargo remains in place, as are restrictions on travel by U.S. citizens to Cuba; and

**WHEREAS,** The easing of international relations and trade between the United States and Cuba benefit both countries, particularly in the areas of food production, education, healthcare, tourism, the arts, music, and biotechnological and medical research; and

**WHEREAS,** An end to the embargo would enable not only renewed diplomatic relations allowing for a dialog on human rights, direct travel for the citizens of both countries, direct mail services, but also a significant expansion of international trade; and

**WHEREAS,** Normalization of relations with Cuba would greatly benefit Michigan's economy including, but not limited to, increased trade opportunities with our automotive industry and agricultural imports and exports. According to a June 17, 2017 report by Michigan Radio, Michigan bean growers specifically expressed optimism about the opening of a new trade market. In 2015, Senator Debbie Stabenow joined a bipartisan group of senators in introducing legislation to end the embargo, following her second official trip to Cuba; and

**WHEREAS,** However, in September 2017, without any precipitating hostile events, President Trump ordered all diplomatic staff withdrawn from the U.S. Embassy in Havana and expelled diplomatic staff from the Cuban Embassy in Washington, D.C., signaling a pause, if not the end of normalization efforts between the countries. **NOW, THEREFORE BE IT**

**RESOLVED,** That the Detroit City Council urges President Donald Trump to renew negotiations with the Cuban government as initiated by the policy of past administrations to build a new, cooperative relationship between the United States and Cuba and to reestablish the diplomatic staffing in the U.S. Embassy in Havana and enable reinstatement of diplomatic staff at the Cuban Embassy in Washington, D.C.; **AND BE IT FURTHER**

**RESOLVED,** The Detroit City Council urges Congress and the President to immediately end all aspects of the United States' economic, commercial, and financial embargo against Cuba, including restrictions on travel to Cuba by U.S. citizens. Venceremos. **AND BE IT FINALLY**

**RESOLVED,** That the Detroit City Clerk transmit a copy of this resolution to the President of the United States, the members of the Michigan Congressional Delegation, and Mayor Mike Duggan.

January 23, 2019